

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	4/6/01
FORMALITY REVIEW	2	96 873	05-30-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ Canceled
☐ Restricted
 (Through numeral)

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Non-elected
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 Appeal
 Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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